<b>GENERAL</b>	<b>FACT</b>	SHEET
----------------	-------------	-------

LL			

BRIEF TITLE APPROVAL D	EADLINE REAS	ON
ETAILS		POSITIONS/RECOMMENDATIONS
ETAILS	Sponsor	POSITIONS/RECOMMENDATIONS
	Program Departments, or Groups Affected	N/A
	Applicants/ Proponents	Applicant
		City Department
		Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals
		Basis of Opposition
	Staff Recommendations	" For " Against Reason Against
	Board or Commission Recommendation	BY " For " Against " No Action Taken " For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	" Pass " Pass (As Amended) " Council Sub. " Without Recommendation " Hold " Do not Pass

DETAILS	POLICY/PF	ROGRAM IMPACT	
	POLICY OR PROGRAM CHANGE	■ NO □ YES	
	OPERATIONAL IMPACT ASSESSMENT	Increased fee revenue	
	FINANCES		
	COST AND REVENUE PROJECTIONS	COST of total project: \$COST of this ordinance Resolution \$	
		RELATED annual operating Costs \$	
		INCREASE REVENUE EXPECTED/YEAR \$5,000_	_
	SOURCE OF FUNDS	CITY  \$	
	BENEFIT COST  Front Foot Square Foot	Average Assessmen \$\$	t

APPLICABLE DATES:

FACT SHEET PREPARED BY: Scott E. Holmes, Division Chief

REVIEW BY:

Leon F. Vinci, MPH, Health Director

REFERENCE NUMBER